

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SOLID STATE IMAGE PICKUP DEVICE, DRIVING METHOD THEREOF AND CAMERA
Case No. P98,2697, the specification of which

(check one) X is attached hereto.
 was filed on _____, as
Application Serial No. _____
and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent Office all information which is known to me to be material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, 1.56(a).¹

I do not know and do not believe this invention was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, and I believe that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as identified below:

I hereby claim foreign priority benefits under Title 35, United States Code, 119 of any foreign application(s) for patent or inventor's certificate listed below

Prior Foreign Application(s)

Number

Country

Date

P10-042514

Japan

February 24, 1998

¹ (b) Under this section, information is material to patentability when it is not cumulative to information already of record or being made of record in the application, and

(1) It establishes, by itself or in combination with other information, a prima facie case of unpatentability of a claim; or

(2) It refutes, or is inconsistent with, a position the applicant takes in:

(i) Opposing an argument of unpatentability relied on by the Office, or

(ii) Asserting an argument of patentability.

A prima facie case of unpatentability is established when the information compels a conclusion that a claim is unpatentable under the preponderance of evidence, burden-of-proof standard, giving each term in the claim its broadest reasonable construction consistent with the specification, and before any consideration is given to evidence which may be submitted in an attempt to establish a contrary conclusion of patentability.

Prior Foreign Application(s)

Number

Country

Date _____

Prior Foreign Application(s)

Number

Country

Date _____

Telephone: 312/876-0200 Ext.

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Inventor's signature

Kazuya Yonemoto

Date Feb. 16, 1999

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Full name of fifth joint inventor,
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Full name of sixth joint inventor,
(if any) _____

Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of seventh joint inventor,
(if any) _____

Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of eighth joint inventor,
(if any) _____

Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of ninth joint inventor,
(if any) _____

Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____